

# ALARM USER PERMIT APPLICATION

**INSTRUCTIONS:** You must fill out and return this application with the twenty-five dollar (\$25.00) permit fee. Make all checks payable to the City of Baton Rouge and mail to the Baton Rouge Police Department, Alarm Enforcement Division, P.O. Box 2406, Baton Rouge, Louisiana 70821 or bring to Police Headquarters at 9000 Airline Hwy., Baton Rouge, LA. Any concerns may be directed to the Alarm Enforcement Division at (225) 389-3805 or by email at <mailto:BRPDAlarm@brgov.com>.

**NOTE:** The operation of an emergency alarm system without the required permit will subject you to a fine of up to \$250.00 and a possible jail term and each day of violation is punishable, as a separate offense.

## PLEASE PRINT OR TYPE

Complete this Section if Alarm is installed in a Business

Name of Business: \_\_\_\_\_

Representative Applying: \_\_\_\_\_  
(Last Name) (First) (MI)

Driver's License Number: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
(Suite Number & Name) (City) (Zip)

Mailing Address: \_\_\_\_\_  
(P. O. Box. Street Number & Name) (Suite) (City) (Zip)

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Home) (Work)

Complete this Section if Alarm is installed in a Residence

Name Resident(s): \_\_\_\_\_  
(Last Name) (First) (MI)

Driver's License Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
(P. O. Box. Street Number & Name) (Suite) (City) (Zip)

Mailing Address: \_\_\_\_\_  
(P. O. Box. Street Number & Name) (Suite) (City) (Zip)

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Home) (Work)

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The Alarm System being registered is: New Existing Installation Date: \_\_\_\_\_

Name and Address of Alarm Company that installed your system: \_\_\_\_\_  
\_\_\_\_\_ Phone No.: \_\_\_\_\_

Name and Address of Monitoring Company (if any): \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_

## OFFICIAL USE ONLY

DATE RECEIVED: \_\_\_\_\_ DATE ISSUED: \_\_\_\_\_ PERMIT NO.: \_\_\_\_\_